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ABSTRACT

This report presents case studies of pregnant and parenting teenagers in the "Big Five School Districts," New York State's five largest urban school districts: Buffalo, New York City, Rochester, Syracuse, and Yonkers. Adolescent parents and their children depend heavily on a number of services to survive, including education, health, and social services. While some programs exist that provide a coordinated range of comprehensive services, many others are piecemeal and fragmented and operate in isolation from each other. Holistic service networks are critical in helping adolescent mothers succeed as students and parents. This report presents 16 problems and recommendations specific to the needs of pregnant and parenting teenage students. The report proposes a model education program to coordinate available services and suggests additional health and social services. The case manager is seen as the critical link between school and other essential services as well as the means to save money by avoiding duplication. While schools cannot and should not assume complete responsibility for noneducational services, they are crucial in coordinating educational and social service agencies. Recommendations are included for both in-school and community day care programs. The report includes a bibliography listing 41 references. (AF)

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Seeking Success: Educating Pregnant and Parenting Teenagers

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The Conference of Large City Boards of Education

Seeking Success:

Educating Pregnant and Parenting Teenagers



1990

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PREFACE

There are more teenage parents today than ever before, particularly in the "Big Five School Districts." Two-thirds of all babies born to teenagers in New York State reside in our urban areas. There are 45 babies born to teenagers in our cities each day. This translates into two additional classrooms daily and 730 classrooms each year. These statistics have serious implications for our pregnant and parenting students and for the lives of their children who will fill our classes within the next five years. The quality of the mothers' and children's lives have an enormous impact on our schools and communities. There is a need to focus on these at-risk students and their children, our future students, to make wise policy decisions in many areas. Recognizing this fact, The Conference of Large City Boards of Education decided to explore the issue of educating pregnant and parenting students and their children to better the chances for success for both mother and child. When a young mother fails to complete high school, she is setting her child up for failure before the child even enters school.

Research has shown that education makes the difference more than any other factor in assisting these young people. However, a holistic approach to their lives is critical. Currently this comprehensive approach is available to few people.

This report addresses some of the issues in educating pregnant and parenting students. Who are these young mothers? What services must they have in order to stay and finish school as parents? What programs are there that work? Along with these questions, the report also examines young mothers' service needs other than education, and offers recommendations for improved coordination of all services for pregnant and parenting teens.

Special thanks is accorded to the following individuals who made a significant contribution to the report: Buffalo: Josephine Robbins; New York City: Stephen Phillips; Rochester: Donna Phillips, Richard Elmer and Ruby Smith; Syracuse: Ann Marie Spatafora; and Yonkers: Barbara Cox. Also, we are grateful to Constancia Warren of the Academy for Educational Development for her assistance.

Last but not least, much appreciation for the endless hours devoted by Michelle Ein and Kammy Gillespie of the Conference of Large City Boards of Education.



Jacqueline Freedman
Executive Director

EXECUTIVE SUMMARY

Every 67 seconds in the United States, a teenager has a baby. Every day in New York State, more than 70 babies are born to mothers who are between the ages of 11 and 19. 45 babies are born to teenagers in the "Big Five School Districts" every day. This has critical implications for the young mother, her child, our communities and the state. The future of these two generations, teen mother and child, is in a precarious state teetering between success and failure. Success to these young families will bring social, economic, and intellectual contributions to our communities, while failure will result in personal devastation and waste at a heavy cost to society.

A pregnant or parenting teenager is as likely to be a high school dropout as she is to complete her high school education; eight of ten young women who become mothers at age 17 or younger do not complete high school. Education has been proven to be the single most important factor determining the success of young people. The National Academy of Science reports that although children of young mothers are at-risk for health problems, as well as intellectually, emotionally and socially, "few of these problems are the direct result of their mother's age at first birth...they are mediated...by the social, economic and cultural conditions of the children's lives. Of special importance is the mother's education." Young parents have a great deal to gain by completing high school. Parents who have more education are likely to earn better paying jobs, provide their children with proper nutrition, a safe environment, and appropriate health care services. Humane, fiscal and legal reasons demand that these young women and their children receive the services needed to allow them to lead successful lives.

Seventy five percent of teen mothers are from families at or below the poverty level. It is a fact that parents' level of education and their aspirations for their children have a significant effect on their children's attitudes, academic achievement, and tendency to become welfare-dependent. In New York State, one in four children is born into poverty. The proper education and support services can make a difference to many of these young women and their children.

This report provides case studies of pregnant and parenting teenagers that vary from Michelle who is a high school dropout to Mary who became salutatorian of her graduating class and won two scholarships to college. Education and support services made the difference between success and failure in these young mothers' lives. Each of the "Big Five School Districts" has programs for pregnant and parenting teenagers but none have enough programs and resources to serve the number of students in need.

Adolescent parents and their children depend heavily on a number of services to survive, including education, health and social services. While some programs exist which provide a coordinated range of comprehensive services, it is more likely that services are piecemeal and fragmented. Holistic service networks are critical if we expect teen mothers to succeed as students and parents. Nonetheless, many services operate in isolation of each other. There is limited if any coordination between education, health, and social service agencies in identifying or providing services to pregnant and parenting teens. State and local governments, schools, community service agencies, health organizations, churches, businesses and community

organizations must work together to focus on a comprehensive program for young mothers and their children.

A number of steps can be taken to coordinate the myriad of services being provided in an unsatisfactory helter-skelter manner. A model education program is included to meet that facet of these young women's lives. Additional health and social services must also blend into these students' days to provide a comprehensive road to success. The critical link between school and other essential services is the case manager. This person is not only the pivotal point for providing holistic services, but saves money by avoiding duplication. While schools can not and should not assume complete responsibility for those non-educational services, schools can serve as a central location for many of the services. Many low or no cost recommendations are included in this report to link schools and social services agencies.

Day care is a crucial component for those attempting to complete their education. There are not nearly enough day care opportunities to serve young mothers and babies. Recommendations are included for both in-school and community day care programs.

Many of the recommendations in this report cost little or no additional money. Many only require a better use of current resources. This will take the cooperation of governmental and other agencies on the federal, state and local level. Small investments in educational grants for in-school programs will earn big dividends. In order to have these young women and their children lead successful lives and become productive members of society, we must reform current methods and develop a holistic approach to help pregnant and parenting teenagers and their children become successful and productive members of our communities. Recognizing the many needs pregnant and parenting students have in order to complete school, this report recommends the following steps be taken:

RECOMMENDATION 1: *The state should provide a categorical grant program for schools to meet start-up costs or to fund support services not otherwise provided to pregnant and parenting teenagers.*

RECOMMENDATION 2: *Schools with a high number of pregnant and parenting teenagers must develop and implement a written plan to serve pregnant and parenting students and their children with a meaningful educational program, incorporating support services, a case manager and a staff development component, with input from community agencies which serve these teenagers.*

RECOMMENDATION 3: *Tutorial services must be expanded. There must be more on-site and at home assistance for students who require remediation in basic skills or tutoring to keep up with missed classes. Resources must be made available to assist these young women over sporadic periods of time.*

RECOMMENDATION 4: *All students participating in special services for pregnant and parenting students must have access to a parenting course tailored to meet their needs.*

RECOMMENDATION 5: *Schools must provide programs with many of the components mentioned in the New York City model (pp. 15-16). In addition, flexibility must be accorded if the mother or child's health requires that the length of their school day must be adjusted. New configurations of scheduling, tutoring and time for completion must be created to ensure that students can keep up with course work. This would in no way change the expected educational performance outcomes of these students.*

RECOMMENDATION 6: The state should insist upon an integrated goal: that of providing cohesive, case-managed prenatal, obstetrics, well-baby, day care, social service, and educational services to pregnant and parenting teenagers. In order to receive state funds, the approval of a program must be tied to a written plan of comprehensive case management services. Any case manager working with pregnant and parenting teenagers must take a comprehensive approach to ensure that young women and their children receive other necessary services.

RECOMMENDATION 7: Social service workers and all providers of services to young teenagers must find the most convenient way to meet their needs outside of instructional hours. Whenever possible, services should be delivered in or near schools, so that students may obtain services during free periods or after school.

RECOMMENDATION 8: Until these services are provided at or near schools, there must be total state reimbursement for transportation for mothers and their children to attend their appointments.

RECOMMENDATION 9: All communities must develop a coordinated outreach program to locate and serve pregnant and parenting teenagers. This program could include a worker at health clinics or in the maternity wards of local hospitals, public service announcements on radio and television, and booklets written in several languages to direct teenagers to educational and other service options.

RECOMMENDATION 10: As a condition of approval of service delivery plans by the state Department of Social Services, local social service agencies should be required to obtain signed documents by local educational authorities to assure that social service workers and educators are aware of the best opportunities for different types of welfare recipients. In addition, state law should be changed to have educators advise students on the best program for their individual needs to avoid the wholesale placement of students in inappropriate programs.

RECOMMENDATION 11: Uniform datakeeping requirements for social service agencies should be revised so that educational level of attainment and current educational status is readily available to social service personnel dealing with teenagers, whether individually or for statistical needs throughout the locale.

RECOMMENDATION 12: Schools and social service agencies must work with community planners and private providers to ensure that adequate placements are set aside for the children of teen mothers.

RECOMMENDATION 13: Day care policy and fiscal guidelines must be revised to accommodate teenage parents who are attending school. A new category of service delivery and fiscal reimbursement needs to be developed specifically for parenting students. Education and social service personnel must develop integrated service plans together for this new day care set-aside program. At a minimum, funding should be based upon reimbursement of day care "slots," rather than on daily attendance. In Massachusetts, providers are reimbursed on a cost basis for services contracted by the state's Department of Social Services. Social Service regulations pertaining to day care reimbursement are being revised and hopefully they will be more advantageous to teenage parents.

RECOMMENDATION 14: Resources for day care services should be combined with those which are available such as TASA, APPSP, social service and health programs. Current programs must be expanded so that they can be coordinated into school-based day care and other school programs for these young women and their children.

RECOMMENDATION 15: Social service law, which excludes funding start-up costs for school-based day care centers, should be changed. In addition, state reimbursement for school building aid must include facilities for day care/early childhood centers that are part of the school program.

RECOMMENDATION 16: *Regulations and funding reimbursement for transportation of pregnant and parenting students and their children to and from school and day care facilities should parallel those used for special education students, waiving mileage requirements for transportation aid.*

Education is the key to success for the multitude of teen mothers and their children. Without an education, most of these mothers and their children face lives of poverty and strain that are costly to themselves and to society. Humane, legal and fiscal reasons demand that these young women receive a quality education and those services necessary to prepare themselves and their children for productive lives.

The Conference of Large City Boards of Education represents New York State's five largest urban school districts -- Buffalo, New York City, Rochester, Syracuse and Yonkers -- educating more than one million students. The "Big Five School Districts" are concerned that every one of our students completes their education. Almost two-thirds of all teenage births in New York State occur in these five districts. Since pregnancy and parenting are the largest causes of young women not completing their education, schools face a heavy challenge to ensure that they graduate.¹ This must be achieved despite inadequate fiscal resources, a lack of space in already crowded city schools, and fragmented community support services. In spite of these difficulties, school systems must work with their staffs and with other agencies to ensure parenting students and their children a chance to succeed. Adolescent mothers and their babies are a significant segment of our population. Every 67 seconds, a teenage mother gives birth in the United States.² Nearly one million young women under age 20 are mothers.³ Education and work skills allow these young women to have jobs that pay above the poverty level, allowing them to escape the "working poor."

Statistics portray a bleak future for teenage families and society. The number of teenagers giving birth in the United States has increased; the implication of this upward trend for our future is so great that we must commit ourselves to this at-risk population. Teenage mothers and their children will be an asset or a liability to our country -- the choice is ours. Some facts, nationally, statewide, and in the "Big Five School Districts" illustrate the present situation:

ON THE AVERAGE DAY IN THE UNITED STATES:

- One out of six babies is born to a teenager;⁴
- 1,300 babies are born to teenagers;⁵
- 26 thirteen and fourteen year olds give birth to their first child;⁶
- 13 sixteen year olds have their second child;⁷
- 40 teenage mothers give birth to their third child.⁸

EVERY DAY IN NEW YORK STATE:

- 72 babies are born to teenage mothers;⁹
- One baby is born to a teenager younger than 15;¹⁰
- 26 babies are born to 15-17 year olds;¹¹
- 45 babies are born to 18-19 year olds.¹²

IN THE "BIG FIVE SCHOOL DISTRICTS":

- An average of 45 babies are born to teenage mothers every day;
- In Buffalo, one high school alone had 140 pregnant teenagers;
- In New York City, 13,000 adolescents give birth annually, 2/3 of whom have not completed high school. Their babies will fill more than 500 classrooms each year;
- In Syracuse every 2 1/2 weeks, enough children are born to teenage mothers to fill an entire classroom;
- In Rochester, the 948 babies born to adolescents annually could fill two entire elementary schools;
- In Yonkers, there are enough babies born to adolescent mothers to fill 12 classrooms each year.

Research indicates that the probability of independence and prosperity for these young women and their children does not even equal the toss of a coin. Teenage mothers have less than a fifty percent chance of completing their high school education.¹³ In New York State, 64 percent of all births were to mothers with less than a high school education.¹⁴ In fact, eight of ten young women who become mothers at the ages of 17 or younger do not complete high school.¹⁵ Seventy-five percent of teenage mothers are from families that are at or close to poverty level.¹⁶ Many live in neighborhoods that are racially isolated. In the United States, fifty percent of welfare expenditures go to families where the mother was a teenager when she first gave birth.¹⁷ One out of six babies born in this country every day is the child of a teenage mother, who is often poor.¹⁸ Tragically, one out of four children in New York State is born into poverty.¹⁹ The poverty cycle must be broken for

these young women and their children by providing educational and support services.

When a teenager has a child, both of these young people are at risk of failure. Education is critical to help cut the lines of poverty. Education can provide these people with successful futures. The National Academy of Science's report Risking the Future found that although children of young mothers are at-risk for health problems as well as intellectually, emotionally and socially, "few of these problems are the direct result of their mother's age at first birth...they are mediated...by the social, economic and cultural conditions of the children's lives. Of special importance is the mother's education..."²⁰

Significant barriers exist that block efforts to educate teenage mothers. They are primarily an at-risk population. They face increasingly difficult obstacles to staying in school in the months ahead. In fact, half of the teenage parent population drops out of school before they are pregnant and have great difficulty returning to school. The Committee For Economic Development notes, "Clearly, teenage motherhood is both a cause and a consequence of dropping out. Girls who become pregnant are often bored or turned off by education. For many who intend to graduate, get a job and even go on to college, their choices become limited by the practical necessity of caring for their children and the general lack of support mechanisms beyond welfare."²¹ Yet young parents have a great deal to gain by completing high school: parents who have more education are more likely to earn better paying jobs, provide their children with proper nutrition, a safe environment, and appropriate health care services.²²

Remaining in school is vital not only for the young mother, but also for her child. Parents' level of education and their aspirations for their children have a significant effect on their children's attitudes, academic achievement, and tendency to become welfare-dependent. Among children of teenage mothers, each additional year of the mother's education reduces the likelihood that the child is retained in grade by half.²³ Children born to dropouts have much lower academic performance than children born to mothers who were either in school or at their grade level when they became pregnant or who continued school after their first child was born.²⁴

One of the negative outcomes of children born to teenagers is that they achieve less in school not necessarily because of low birth weight, but because their mothers did not stimulate them so that they developed intellectually at the same rate as other children.²⁵ Parenting courses are valuable because they teach teenage mothers to have realistic expectations of their child's development. This leads to better parenting practices and subsequently, increased child performance.

The practical reasons for helping teenage mothers and their children lead successful lives are compelling for a country in which birth rates are declining. Each life is even more valuable to our country's future. Fewer births and a growing elderly population requires that the younger members of society be working and active contributors to the tax base. Since women make up half of the prospective work force which is dwindling in size and talent, it is critical that they be gainfully employed.

Because pregnant teenagers often do not finish school, they are usually not prepared to enter the work force. These young women must be motivated to complete school and obtain marketable work skills. Schools must provide meaningful classes and support services which meet the needs of these young women. Studies show that in order to be economically independent, one must have a high school education and also some form of postsecondary education. A high school education is not merely a building block to a stable future. It is a necessity. Pregnant and parenting teenagers must be provided with the services needed to ensure that they can be productive members of society. The United States can not afford to neglect investing in these young families.

Aside from humane and economic factors, there are legal reasons that require us to educate our teenage mothers. These young women are legally entitled to an appropriate education until they graduate or reach the age of 21. In addition, Title IX of the Federal Education Amendments of 1972 prohibits discrimination on the basis of sex in educational programs or activities which receive federal funds. Just as we provide additional services to meet the needs of handicapped children so that they may be successful in school, so must we ensure that pregnant and parenting teenagers receive necessary services to complete their education. Academic services should be provided by schools, but support services are often the responsibility of state, municipal and community organizations. In order for these young women to achieve success, a system of holistic services must be available.

CASE STUDIES OF PREGNANT AND PARENTING STUDENTS

Although studies on the percentage of students who drop out before or after having a baby have a variety of outcomes, all agree that at least fifty percent of female students leave school before they are pregnant. Most of these young women have been educationally at-risk throughout school. According to research, a pattern for the typical pregnant student is illustrated in the following case studies.

MICHELLE:

Michelle, a seventeen year old pregnant mother, dropped out of school last year. She always did poorly in school and realized she would never have the credits to graduate. She was bored and school had lost all meaning for her. Michelle found she couldn't get a job without adequate employment and academic skills. She spends a lot of her time watching television. She is now pregnant and looks forward to having her baby.

MARIA:

Maria is fourteen years old and in the sixth grade. She lives with her six step-sisters and brothers and her mother Florence, who herself had a baby at teen. Maria has been academically at-risk since she entered school. She began school at

five but had the verbal skills of a three and a half year old. She did poorly in school in kindergarten and by first grade already saw herself as a failure. She repeated the third and fifth grades. Maria has just discovered that she is pregnant. She is thrilled because now she can have someone to love and won't have to go to school so often. In fact, she can hardly wait until she is old enough to drop out of school.

Both Michelle and Maria illustrate common characteristics found among pregnant teenage mothers. Although pregnant teenagers come from all backgrounds, the majority come from poor socioeconomic circumstances. Most have been educationally at-risk students for many years, and for them school has been unimportant. Often, their mothers were pregnant teenagers. Frequently, these young women have little self-esteem and welcome pregnancy for its status, new relationships, the love of their child, and a new sense of purpose and meaning.

Not all young women who become pregnant drop out of school. Researchers and practitioners have found that by providing programs and services to assist them, pregnant and parenting students can go forward to productive futures. The following case studies are examples of young women in the "Big Five School Districts" who completed school and are leading successful lives.

ADA:

Ada, the oldest of ten children, was a senior at a Buffalo high school when she became pregnant. Since this was prior to the federal guarantees for equal rights for pregnant teenagers, students like Ada were often dropped from school. Ada knew about a school for pregnant and parenting students a few blocks from home, and she enrolled. Ada graduated from high school while working at a local drug store part-time. She then graduated from college and has been a branch manager of a bank for 12 years. Her determination and accomplishments have been an example to her family. Her son, Brandon, works part-time and he is enrolled in college.

ANITA:

Anita, a Buffalo high school senior, became pregnant after she had been accepted to college. Although her family gave her no assistance, she was determined to graduate from high school and then from college. For four years, she took the bus every day across town to take her baby to a sitter, and then traveled to her college classes. Anita graduated from college with honors.

A fine teacher, Anita became an elementary school principal. She is currently working on her doctorate in education.

TYRA:

Tyra, a good student, gave birth to a son just prior to her senior year at a Rochester high school. As her son participated in the day care program at her school, Tyra had to join Parents Anonymous, a support group which teaches parenting skills and helps resolve problems in young parents' lives. In addition to her academic subjects, Tyra was part of a work program at a local market. Her dedication and hard work resulted in her being valedictorian of her high school class. She will use

the more than \$20,000 in scholarship awards to attend the University of Rochester. Tyra and her son have a most promising future. Her talent and determination, coupled with day care and support services from the school system, enabled her to reach her goals.

MARY and MICHAEL:

Mary, a Rochester student, remembers her 9th and 10th grades as a time when "I had terrible grades and my attendance was atrocious." Mary also became pregnant. Because of these factors, Mary transferred to an alternative school where classes are smaller, teachers are dedicated to at-risk students, support services are available, and day care services are in the building. With the birth of her son Michael and the nurturing environment of the school, Mary's attitude towards school changed drastically, demonstrated by her 90 percent attendance rate. Mary's 3.0 average earned her the distinction of graduating as class salutatorian. She is a proud recipient of two scholarship awards. Mary began her studies at Monroe Community College and intends to earn a bachelor's degree so she can work in the field of human services.

Both Mary and Michael flourished at the school for pregnant and parenting teenagers. Michael, Mary's two-year old son, thrived in the day care program. His healthy development assured his mother of his well-being, and encouraged her to strive for a good life for the two of them. As Michael grew and developed into a healthy toddler, Mary overcame the stigma and burdens of early parenthood. She is going on to achieve a better life for Michael and herself.

These young women illustrate some of the various perceptions teenage mothers bring to their situation. Some become motivated by the birth of their children, finding ways to see that their child has a good life. Others are stymied by the added pressures motherhood brings to their adolescent lives. Some who hope that their children would give a new meaning to their lives find themselves overcome with responsibilities. Teenage parents still have their adolescent needs to be met, and now must meet their childrens' requirements. Schools, social agencies, the teenager's family, and communities must help them to succeed.

"BIG FIVE SCHOOL DISTRICTS" PROGRAMS

We have found successful programs which are working for pregnant and parenting teenagers in schools. The "Big Five School Districts" have tried within our fiscal and space constraints to begin better serving these young women. Although each of our districts has specific programs for teenage mothers, we are able to serve just a tiny fraction of those who need assistance.

BUFFALO: FULTON ACADEMIC COMPLEX'S SCHOOL FOR PREGNANT TEENAGERS

Fulton Academic Complex is an optional program for students who do not wish to be in their home schools during pregnancy. Its goal is to ensure that students receive full academic and support services enabling them to return to their home school with no academic losses. Approximately 200 students attend the school during the year. The pregnant mothers stay until the baby is born and may remain through the end of the school year. Most students remain at least until the end of the semester. Fulton students follow the same curriculum as in their home school so that this period in each pregnant mother's life will not detract from her academic progress. The key ingredients at Fulton Academic Complex are its devoted staff and its ability to continually provide academic and support services which link students to the programs at their home schools. When a student gives birth or must stay at home for health reasons, the principal has each teacher prepare the student's work. All books, tests and other materials are supplied with appropriate information to the home instructor who sees that complete academic services are rendered. Fulton's comprehensive home instruction program contrasts with others which often are a collaboration by the independent teacher and the student with little or no involvement from the student's classroom teacher.

Health services are provided by the Maternal and Infant Care Clinic at the Fulton Academic Complex, which provides comprehensive services to pregnant and parenting teenagers and their babies. This excellent state program provides doctors, nurses, nutritionists and social workers to assist these young women.

Buffalo has been developing a better relationship with their students' social service workers. Teen Age Services Act (TASA)* workers will be coming to the school several times a month to provide on-site services so that student class time is not disrupted by visits to the local social service office. It is easier for an adult social service worker to visit the school than to make each eligible pregnant teenager or young mother and baby take a bus to their office. There are high expectations that with school and social service staffs working in tandem to help students, school completion rates will increase.

NEW YORK CITY:

New York City has approximately 26,000 adolescent mothers, more than 17,000 of whom have not completed school.²⁶ The New York City Board of Education operates or participates in several dozen initiatives dealing with pregnant and parenting teenagers. The largest concentration of such programs lies within the newly-reorganized "Programs for Pregnant and Parenting Students." There are six specific programmatic strands within this program.

* Teen Age Services Act (TASA), a social services program, provides case management to AFDC-eligible teenage parents.

The High School Division operates five schools serving 2,000 pregnant students over the course of a given year. Half of the students come from grades nine or below in the community school districts, and half are from high schools. Half of the students in the program were prior dropouts and use the programs as a way to re-enter school. In addition to regular academic programs, all students receive extensive social work intervention and classes in health, nutrition, and parenting skills. These schools do not grant diplomas but provide academic and support services to see that the students stay in school during pregnancy and after delivery until the end of the marking period, when students return to their home schools or graduate with the credits earned at the schools for pregnant teenagers.

Four of the five sites have in-school day care, and a high concentration of support services. Each student has a counselor and social worker; as the student nears the date of delivery, she is assigned a social worker who helps transition the student through delivery to return to school, assisting in locating appropriate day care whenever possible.

Project Return was implemented during the 1989-90 school year in three community school districts, aimed at assisting adolescent mothers with more than one child. While the elementary-school age child attends his or her regular elementary school, on-site General Educational Development (GED) test preparation program is provided for the mother in the same building, together with day care for the younger child. Referrals to other Board of Education, Adult Education, or community-based education are made when GED preparation is not appropriate for the parent. Budget constraints have prevented expansion of the program during the 1990-91 school year.

Teen Outreach for Pregnancy Prevention (TOPP), established in 1975, coordinates the work of a wide variety of volunteer and community-based organizations which provide both individual and group counseling to students in junior high and senior high schools.

The Babygram Project was implemented in 1989 to provide outreach and educational planning assistance to teenage mothers in prenatal, obstetrics, and well-baby clinics, informing them of educational opportunities available to them and their children, providing referral assistance for mothers needing educational placement and day care. Budget constraints eliminated the program for the 1990-91 school year.

Curriculum and staff development initiatives in 1989 resulted in a total rewriting of the Board of Education's parenting curriculum. In addition, more than 125 high schools began teaching parenting classes, including specially designed versions of the course for mothers whose children were being served in the in-school Living for the Young Family through Education (LYFE) day care program.

During the 1990-91 school year, the Board of Education opened a new model day care center and staff development facility. The center will provide pre-service and in-service for professionals and other workers in day care facilities, in-service education for instructors in high school parenting classes, and special topic institutes for counselors, social workers, and schools' coordinators of services for pregnant and parenting students.

The Services Linkages Program matches 24 school based coordinators for pregnant and parenting students with two social workers who provide training, direction, connections to resources, and support services, both individually and in regular group meetings. These school based coordinators help link pregnant and parenting students' resources, assist in resolving academic problems, and help secure the academic services these students need to complete high school. The coordinators also act as change agents, working with other school personnel to increase understanding of and responsiveness to the needs of pregnant and parenting students.

ROCHESTER:

Rochester has been providing services to young mothers for over twenty years. It has three excellent programs that have been in existence for many years and two beginning in the fall of 1990 that show great promise.

The Young Mothers Program began in 1969 to provide academic and support services to continue the formal education of the pregnant teenager without interruption during the pregnancy and post-partum period. Currently the program serves about 200 students, including those with special education needs. The program also provides the young teenagers with ancillary services which include counseling, parenting skills, nutrition, pre- and post-natal care, career development, work study experience, and classes for labor and delivery.

Project Option, a career development component, has been especially beneficial. For some young women, their pregnancy signifies the end of all hope. Project Option offers them a positive option in education and employment. The program, which includes a regular school program, offers intensive pre-job learning, testing, resume writing, and a ten week work experience which may lead to permanent part-time employment.

Edison Technical and Occupational High School, a program of Child Care Services, was developed to serve a variety of needs: first and foremost, to prepare workers for jobs for which the demand is growing; and second, to provide 48 secondary Child Care Services students with hands on experience while furnishing day care services to 22 children of teenage students. The parents of the young children must attend occupational education classes, be available for service to their children during study and lunch periods, and pass parent education programs. The program attracts students who left school to return.

The Equal Start program is new this year. Its objective is to retain teenage parents in school while simultaneously preparing their children for school. Many of the major barriers to education are eliminated by providing co-ordinated services alongside of the students' academic studies. The result is a combination of health services, parenting training, and additional family services in one clearly outlined program for teenage parents working toward their high school diploma.

Upon joining Equal Start, the pregnant teenager is assessed by a case worker and a "personal development plan" is devised, where the student's immediate and long-term goals for health care, child care, education and future development are

outlined. The student also learns to link into the service agencies she and her child need.

Having attended to these immediate needs, the student can now focus on her academic studies, and prepare her child for school as well. Whenever possible, the student's academic studies will lead to a high school diploma. The student and her case worker arrange her schedule to accommodate her choice of where to continue school. The student has three options: she can go to a high school with the Equal Start Program, the high school with the Young Mothers Program, or a GED program. The Equal Start program includes a forum for pregnant and newly parenting students, where students address their specific health and social concerns. Students in Equal Start must take two courses on parenting and child development. Through these classes and special activities, young mothers learn to assess their babies' developmental and health needs. They also learn to be stimulating, effective parents. Equal Start students who choose GED classes must also participate in home based guidance and the parenting and child development classes.

Child care is provided at four schools, and space is reserved for Equal Start participants. Students whose children are at in-school child care must spend one period a day with their child in the center, so that they can apply the parenting skills they have learned and get feedback from the providers if needed.

The Family Literacy Project is another new program this year. The approach centers on the role of home and family in breaking the cycle of illiteracy and improving economic circumstances of youngsters in the home. There are four components of this model: early childhood, adult education, parenting education, and vocational education.

The early childhood curriculum focuses on the child's emerging cognitive skills. Through active exploration, personal discovery, and interaction with peers and adults, children thrive on their learning processes and encourage their parents to participate in the program as well.

The adult education component is a highly individualized curriculum, for students whose needs and functioning levels may vary from non-reading to almost GED level. Teachers develop students' plans with an individualized academic diagnosis, with which the student's goals and needs become the focal point for instruction.

In the parenting education component, two specific times in the school day are set aside for parents to reinforce their role as their children's first and most influential teacher. Parents and children play together, bolstering family interaction and healthy social and emotional development.

In the vocational education component, children nap while their parents study employment skills such as goal setting, self-esteem, interviewing and job readiness. The parents also perform volunteer jobs within the school, such as tutoring, reading to a class, or working as a library aide. The jobs serve as work experience for the parents and help ready them to seek employment.

SYRACUSE:

Syracuse's most comprehensive program to serve pregnant and parenting students is held at Fowler High School which has a large number of pregnant and parenting students. Fowler provides a unique range of academic and support services to assist these adolescent students in completing their educational program and to help them to more successful lives. The true success of the Fowler High School program is evident in the 59 percent reduction of pregnant and parenting teenage dropouts since its inception.

The Syracuse Mentor Youth Learning Experience (SMYLE) program matches 15 at-risk teenagers with successful working women in a mentoring support relationship that includes two hours of weekly individual activities, three large group events, and biweekly sessions for students at the school.

Study and Support Services for pregnant and parenting students meets daily to support academic work, assist students in understanding physical, social and psychological changes during pregnancy, refer students to the school social worker for assistance in meeting social needs, and provide guest speakers from community organizations which have services to assist young parents.

Fowler also offers two credit courses: one which teaches young mothers parenting skills, child development and psychology, and one exploring ways to promote a healthy and safe environment for children.

Although Fowler High School does not have day care services, it works in conjunction with the local department of social services to provide day care in licensed day care centers, certified day care homes or private babysitters.

One of the most promising aspects of the Fowler High School Program is the Teen Pregnancy Task Force which meets monthly to coordinate community services for pregnant and parenting teenagers. This group of educators, social workers, health workers and community members work together to assist these young women with their combined resources. It is hoped that together they will find ways to maximize services to pregnant and parenting teenagers, only minimally disrupting their academic programs.

Syracuse also has the Young Mothers Educational Development (YMED) program for young women who wish to leave their home school during their pregnancy. This comprehensive program is managed cooperatively by the city school district, the county health department's maternal and child health bureau, and the State University Health Science Center. YMED provides pregnant students with educational, medical, nutritional and parenting services. On-site day care is available for those parents who wish to stay until the end of the semester. However, students are encouraged to return to their home schools shortly after delivery for a broader range of academic services.

YONKERS:

Yonkers has two approaches to programs for pregnant and parenting teenagers: one based on prevention and the other focusing on case management.

The Family Life Education program for students from grades K-12 has a curriculum which was developed with the input of a community advisory committee. The elementary school early intervention curriculum focuses on students' emotional, social and physical growth. Children develop a more positive self-image while learning to communicate, make decisions and resolve problems. The secondary level curriculum discusses healthy lifestyles, physical, social and emotional changes, puberty, reproduction systems, decision making, communication, the right to say no and parenting. It is hoped that this long term approach to Family Life Education will have positive effects on students' lives and help to prevent pregnancy.

The Yonkers school district, in conjunction with the city's Youth Service Agency, is the co-lead agency in a consortium of 11 community organizations providing the Adolescent Pregnancy Prevention Service Project (APPSP). This program is designed to provide case management, counseling, health care and day care to at-risk teenagers, pregnant girls, their families and male partners. The case management process provides site-based assistance to all secondary students and "on call" assistance to elementary students in need of such service. This case management assistance is provided by five community based organizations.

In addition, the case managers provided by community agencies refer students to the other appropriate agencies through a coordinated linkage agreement to meet student needs. The grant also helps provide a supervised day care program for eight infants. This program not only serves the needs of day care but also serves as a laboratory for the district's magnet health professions program.

Finally, the residence for pregnant and parenting teenagers, with room for sixteen young women and their children, provides for coordinated counseling, education and health care for both mother and child.

EDUCATION-- PROBLEMS AND RECOMMENDATIONS

Although schools are providing programs which are beneficial to pregnant and parenting teenagers, there are not enough schools or enough programs to meet the need. For example, the number of pregnant and parenting teenagers in the Buffalo school district is estimated to be more than two times the number of students attending Fulton Academic Complex.²⁷ All of our districts, indeed practically every school in the nation, face the same burgeoning need.

PROBLEM 1: Schools do not have the funds to provide all of the additional services needed for young mothers' programs.

RECOMMENDATION 1: The state should provide a categorical grant program for schools to meet start-up costs or to fund support services not otherwise provided to pregnant and parenting teenagers.

PROBLEM 2: Some schools have more pregnant and parenting teenagers than others, and also have higher dropout rates.

RECOMMENDATION 2: These schools must develop and implement a written plan to serve pregnant and parenting students and their children with a meaningful educational program, incorporating support services, a case manager and a staff development component, with input from community agencies which serve these teenagers.

PROBLEM 3: Illness during pregnancy and afterwards for both mother and child often requires these students to be absent more often than other students.

RECOMMENDATION 3: Tutorial services must be expanded. There must be more on-site and at home assistance for students who require remediation in basic skills or tutoring to keep up with missed classes. Resources must be made available to assist these young women over sporadic periods of time.

PROBLEM 4: Teenagers are usually not aware of childrens' development, and have little knowledge of good parenting skills.

RECOMMENDATION 4: All students participating in special services for pregnant and parenting students must have access to a parenting course tailored to meet their needs.

UNMET NEEDS-- LACK OF COMPREHENSIVE AND HOLISTIC NETWORKS

Adolescent parents and their children depend heavily on a number of services to survive, including education, health and social services. While some programs exist which provide a coordinated range of comprehensive services, it is more often the case that services are piecemeal and fragmented. Young mothers attending school must juggle classes, homework, appointments with social service agencies, trips to the doctors for themselves and the baby plus greatly increased family duties. The lack of sleep that goes with raising a young child adds to their difficulties. This exhausting balancing act is exacerbated by the fact that adolescents often miss

the more flexible life they once had, and have yet to complete their own social development. Often they become overwhelmed by their new responsibilities.

Holistic service networks are critical if we expect teenage mothers to succeed as students and parents, yet most services for teenage mothers are fragmented, operating in isolation of one another. Often there is limited if any coordination between education, health, and social service agencies in identifying or providing services to adolescent pregnant and parenting teenagers.²⁸ State and local governments, schools, community service agencies, health organizations, churches, businesses and social organizations in the community must work together to focus on a comprehensive program for young mothers and their children. State programs must have as a funding requirement a planning procedure which includes all community provided services to pregnant and parenting teenagers, as is done in the state's Adolescent Pregnancy Prevention Services Program (APPSP).

Just as it is senseless and unfair to expect that the local health department take responsibility for the parenting adolescent's academic, economic, and other non-health related needs, it is incorrect to assume that schools can meet all of the special needs of these students singlehandedly. While schools can play a major role in assisting these young families, their primary focus is, and should be, education. Yet because of this lack of integration between all service providers, schools have had to become service providers for their pregnant and parenting adolescents to keep them in school, in some cases spending instructional aid monies on day care services.

However, schools can be the central location for all sorts of community-based services, which would allow pregnant and parenting students to obtain needed services without leaving school, and also attract back teenagers who left school. This could be modeled after the Community Schools Program, which provides a variety of services for students in the school building. Schools which eliminate barriers to education for pregnant and parenting students do a better job at retaining and attracting them back. For example, in New York City's schools for pregnant and parenting teenagers, 50 percent of the population are "drop-ins," or students who are returning to school.

Comprehensive community plans are necessary to preclude both voids and duplication in service delivery. Too often, agencies provide services in isolation as if only they rendered services.

Health clinics, hospitals, and departments of social services often provide services to young mothers and their children during school hours, ignoring the fact that these mothers are students, and it is detrimental to the mother and child's well-being when they miss classes. In addition, clinics rarely inform school personnel about health conditions that require special services, such as home instruction. Most students have difficulty when they must miss classes and those with poor school achievement often just give up.

To avoid this problem, community plans should carefully detail the types of services required and the providers of these community services. One testifier before the Assembly Task Force on Teen Pregnancy stated, "I think it's counter-productive to dump money in many directions, unless there's a coordinated team approach... I

think right now that the current state of affairs is one of competition for existing funds. There's a wide range of service agencies, each looking at the action."²⁹ She further advocated the case for coordinated services for pregnant teenagers by stating, "We feel very strongly about having all of the components ready for the girls. And this is typical of what's happening today. This is a network which represents some 30-odd people trying to get a piece of the action and all protecting their own little turf and each doing their own little part. And what happens is when an RFP [Request for Proposal] comes down from the Legislature for limited dollars, everybody competes instead of cooperates."³⁰

A HOLISTIC APPROACH

A number of steps can be taken to coordinate the myriad services now being provided in an unsatisfactory helter-skelter manner. To begin, we must clearly identify the broad nature of services that will assist pregnant and parenting teenagers. These categories include education, health and social services. However, we must also understand the interdependence and relationships vis-a-vis each of the categories. With this important caveat in mind, in 1989 the New York City Chancellor's Working Group on Educational Opportunities for Pregnant and Parenting Adolescents developed what might well be a statewide prototype for educational and support services to assist pregnant and parenting young women in achieving educational and life success:

- Pregnant and parenting students require an educational program that:
 - Reawakens their interest in learning and nurtures their educational motivation;
 - Combines a solid academic program with course content relevant to the lives of pregnant and parenting students;
 - Provides flexible educational options, including alternative attendance patterns and modular curricular units;
 - Includes a supervised home study program for the perinatal period;
 - Uses educational approaches which stress active learning and promote self-esteem;
 - Provides intensive remediation when necessary;
 - Is linked to a life planning curriculum so that each student can examine the value of her or his educational program in terms of personal and family goals; and
 - Prepares them for postsecondary education or employment opportunities with adequate levels of wages and benefits to support both mother and child.

Because pregnant and parenting students often have multiple problems which require varied support services, the educational program must be backed by services which meet the needs of each student with on-site services or service linkages that provide:

- Assistance to return to and stay in school;
- Health care (including prenatal care, family planning, general health care for both mother and child and mental health services);
- Child care;
- Financial support;
- Transportation assistance;
- Personal, family, and other forms of emotional support services;
- Peer counseling;
- Outreach and retention assistance;
- Career and life-skills guidance and vocational counseling;
- Part-time employment;
- Drug rehabilitation;
- Housing assistance;
- Emergency aid to purchase diapers, clothing and food; and
- Job placement.³¹

A case manager who coordinates all services to the pregnant and parenting student is the critical link between schools and other essential service agencies. A case manager should be assigned to ensure that students receive all necessary services. This person can help avoid expensive duplication. The case managers must be committed to working with pregnant and parenting teenagers and able to link knowledge about educational alternatives with advice about available community based services. It is important that the case manager have an aggressive outreach program with health and social service agencies, because the young woman's needs as a student and a parent are inextricably intertwined. If students receive case management services, it is often only for a segment of their needs. For example, perhaps there is a case manager for the teenager's health needs but none for her day care needs. To the other extreme, one young woman had 14 case managers who did not speak to each other, so she received fragmented and sometimes overlapping services.

A HOLISTIC APPROACH -- PROBLEMS AND RECOMMENDATIONS

PROBLEM 5: Often, educational programs do not have a coordinated approach to serving pregnant and parenting teenagers. Sometimes the rigidity of rules and regulations do not allow for the flexibility needed in the unique case of a young woman who is both mother and student.

RECOMMENDATION 5: Schools must provide programs with many of the components mentioned in the New York City model (pp. 15-16). In addition, flexibility must be accorded if the mother's or child's health requires that the length of their school day must be adjusted. New configurations of scheduling, tutoring and time for completion must be created to ensure that students can keep up with course

work. This would in no way change the expected educational performance outcomes of these students.

PROBLEM 6: Student services are often fragmented or unmet. A myriad of public agencies are responsible for services to pregnant and parenting students at the local and state levels. Each agency has its own design for such services, driven by its own regulations and interpretations of its mission. Too often these plans are developed in isolation of each other so that jurisdictions and requirements overlap and conflict. Social service requirements may negate educational requirements; health care plans may interfere with a student's accomplishment of either social service or educational goals. Only coordinated, unified planning and implementation can achieve the type of holistic, case managed systematic delivery of services to pregnant and parenting students.

RECOMMENDATION 6: The state should insist on an integrated goal: that of providing cohesive, case-managed prenatal, obstetrics, well-baby, day care, social service, and educational services to pregnant and parenting teenagers. In order to receive state funds the approval of a program must be tied to a written plan of comprehensive case management services. Any case manager working with pregnant and parenting teenagers must take a comprehensive approach to ensure that young women and their children receive other necessary services.

PROBLEM 7: Students are at-risk of educational failure when they miss too many classes. Caseworkers and health providers insist on meeting with students and their children during school hours: Women, Infants and Children (WIC) program for nutritional needs; Medicaid, Public Assistance, and health providers for both mothers and children. Obviously, students who must miss many classes are hindered and become candidates for failure.

RECOMMENDATION 7: Social service workers and all providers of services to young teenagers must find the most convenient way to meet their needs outside of instructional hours. Whenever possible, services should be delivered in or near schools, so that students may obtain services during free periods or after school.

PROBLEM 8: Students usually have no means of transportation to and from social services offices or health providers.

RECOMMENDATION 8: Until these services are provided at or near schools, there must be total state reimbursement for transportation for mothers and their children to attend their appointments.

PROBLEM 9: Pregnant and parenting teenagers are unaware of service and educational options to help them to stay in school.

RECOMMENDATION 9: All communities must develop a coordinated outreach program to locate and serve pregnant and parenting teenagers. This program could include a worker at health clinics or in the maternity wards of local hospitals, public service announcements on radio and television and booklets written in several languages to direct teenagers to educational and other service options.

PROBLEM 10: The recently passed Welfare Reform Act (WRA) leaves to the discretion of social services agencies whether or not to involve local educational authorities in developing and implementing a plan of service for recipients. In addition, it is the social service worker who determines which if any course of study a pregnant or parenting recipient will participate: a typical full-time, a GED, or a job training program.

RECOMMENDATION 10: As a condition of approval of service delivery plans by the state Department of Social Services, local social service agencies should be required to obtain signed documents by local educational authorities to assure that social service workers and educators are aware of the best opportunities for different types of welfare recipients. In addition, state law should be changed to have educators advise students on the best program for their individual needs to avoid the wholesale placement of students in inappropriate programs.

PROBLEM 11: Local social service agencies do not normally include educational data in their status records. When data is maintained, it is not part of the computerized tracking system but may be kept in separate educational files, thus not available to agency personnel on a regular basis. The lack of such data makes it difficult to meet the client's educational needs and in addition, inhibits systemwide educational planning.

RECOMMENDATION 11: Uniform datakeeping requirements for social service agencies should be revised so that educational level of attainment and current educational status is readily available to social service personnel dealing with teenagers, whether individually or for statistical needs throughout the locale.

DAY CARE

Day care/early childhood services are vital to the young mother and her child. This service supports the young mother's family in many critical ways. Day care is a most important ingredient to allow teenage parents the ability to complete school.

Adult caretakers teach adolescent mothers parenting skills needed to meet their child's physical, emotional and intellectual needs. Further, child abuse incidents are greatly reduced when parents learn how to deal with their own and their children's emotions.

Dropout rates are staggeringly high when day care/early childhood services are not available. Studies show that many teenage mothers are poor students who were planning to quit or who dropped out of school before or during pregnancy. These students usually are low achievers with poor self-esteem, who see little reason to spend time in school. Motherhood can drastically change their motivation. These young women need job training to find work to support their children. They quickly learn that a diploma and marketable skills make a big difference in securing employment. It has been found that teenage parents earn half the lifetime earnings of women who wait until 20 to have their first child.³² Another powerful motivator for these parents is the burning desire that their children have better opportunities in life than they did. The inability to find someone to care for their children may well halt all hopes and opportunities for these young women.

Adult caregivers provide many vital services to the mother as well as the child. The young mother whose child is cared for during the day by a competent professional is able to concentrate on her studies and continue her education. The connection with an adult caretaker brings these young women many benefits. Adolescent mothers need nurturing almost as much as their children do, if not more. These young women are now burdened with the responsibility of caring for another life when often they have not yet matured and are still seeking their own identity. The extra adult support nurtures both parent and child, which is critical to their success.

Parenting skills are a must for any parent regardless of age. Some teenage mothers have never been afforded the opportunity to know what constitutes parenting. A great number of adolescent parents have not been exposed to information that teaches them what is a normal age for child development in such skills as sitting, walking, and talking.³³ It has been found that false expectations of child development can result in such undesirable outcomes for the baby as verbal and physical abuse.³⁴ Armed with the knowledge of child development, the young parent gains confidence, patience, and the ability to facilitate her child's intellectual, emotional and social growth.

Research also shows that teenage mothers have little understanding of infants' need for close dependent attachments.³⁵ When describing a program in Buffalo, one administrator said, "It's wonderful to see the changes in these young mothers. They arrive in September very immature, and not knowing what to do with their babies. Besides having learned critical parenting skills, they now show loving emotions towards their children that were absent before."³⁶ Parenting skills, by teaching how to have positive relationships, also greatly decrease the likelihood of child abuse. In the 8 1/2 years of Rochester's teenage parent programs, there have been only three reported cases of child abuse.

The child's early intellectual and emotional development is greatly enhanced by day care/early childhood services. The Journal of the American Medical Association

reports that among the many benefits of these preventative services are: higher academic achievement and IQ scores, fewer placements in remedial classes, lowered risk of grade retention and school dropout, and fewer behavior problems. In later life, these children are less likely to become juvenile delinquents and more likely to be employed.³⁷ These facts are especially noteworthy in light of the wealth of information which documents that children of teenage mothers face notable health risks, social behavior and self-control problems, and low intellectual and academic achievement compared to children born to older mothers.³⁸

Research demonstrates that low birthweight babies born to teenage mothers are at greater risk of learning disabilities.³⁹ However, some scholars believe that this is because young mothers do not know how to stimulate their children during their early months of life, thus delaying the infant's intellectual development.⁴⁰ The study demonstrated that low birthweight in babies of more affluent and older mothers had no effect on the child's intellectual delay. Trained day care/early childhood workers are able to teach young mothers when it is appropriate and how to play with their children to stimulate their intellectual growth.

All of the "Big Five School Districts" provide some day care/early childhood services for their students. However, none of the districts have adequate services. The provision of sufficient support services have been continually stymied by a lack of space, staff, and interagency cooperation and resources. Yet each of the districts have been trying in their own way to fill this critical need for their students. The following models are examples of ways that we are using day care/early childhood services to better the opportunities for our young parents to graduate.

BUFFALO:

The Parent Child Center at the Fulton Academic Complex provides the sole source of school based day care for 65 children of parenting teenagers. All other young mothers must find day care options on their own or with the help of a social worker.

The school day care center not only accepts children from the mothers enrolled in their traditional or GED programs, but also receives students children from three other schools. Although Buffalo does the best it can to provide day care services neither space or resources permit meeting student needs. There are 250 parenting students at the Fulton Academic Complex plus those in the three feeder schools, but only 65 children can be accommodated.

NEW YORK CITY:

Although the New York City school system has a variety of day care options for its teenage mothers, it cannot meet the needs of the approximately 4,300 students who stay in school. Currently there are 27 in-school day care facilities to serve students in comprehensive high schools, alternative high schools, schools for pregnant teenagers and community-based organizations which provide "drop-off centers" to serve schools which lack them. The New York City school system has opened three

to five day care centers annually since 1980. Although it would like to do more, it has been continually stymied in its efforts by the city's social service department.

The Living for the Young Family through Education (LYFE) program is another strand of New York City's operation for pregnant and parenting teenagers. Starting in 1980, noting that parenting teenagers were unable to locate either public or private day care for children, the New York City Board of Education opened the first center; today, a network of 27 centers, located within high schools and community-based organizations near high schools, provides daily care to nearly 450 infants and toddlers. Group counseling, social work, parenting programs, and well-baby care are provided either on-site or through nearby hospitals.

ROCHESTER:

The Rochester school system has on-site day care services for 15 children of their students at four high schools. The demand for in-school day care is 2 1/2 times greater than capacity. In the summer of 1990 there were already 87 children waiting for space in the fall.

During the 8 1/2 years that Rochester has operated school day care centers, 244 teenage parents and their children have been enrolled, 20 percent have completed their education, and 70 percent continued in school and 10 percent dropped out.

Attendance of teenage parents using day care facilities has been excellent in spite of the problems facing mothers with young children. During the 1989-90 school year, attendance rates at the three traditional high schools averaged 82 percent; the same as the district attendance rate. Josh Lofton Alternative High School had a 70 percent attendance rate in comparison to 54 percent at other alternative programs.

Rochester's Equal Start Program is another example of the school districts' efforts to provide day care in all of its high schools despite a lack of space and funds. The one remaining high school projects to have day care available in 1991.

SYRACUSE:

Syracuse's two programs for teenage parents, Fowler High School and Young Mothers Educational Development (YMED) have different day care options. Fowler High School has no on-site day care, and assists its students in finding subsidized or private day care. YMED provides day care for its students and any leftover places may be filled by children of Fowler High School students who have participated in YMED's clinic services.

YONKERS:

There are sixteen spaces in the city's only day care center for parenting students. The students are responsible for their own transportation to and from the center and school. The program also requires them to spend time at the center for skills sessions in parenting, childhood development, and stress management skills.

This component of the program is specifically designed to provide the teenage parent with effective parenting skills.

Unfortunately, there is not enough space to accommodate the need for day care. It is estimated that fifty young mothers could be in school in 1990-91 if there was school based day care or resources for community based day care.

DAY CARE-- PROBLEMS AND RECOMMENDATIONS

PROBLEM 12: There is not enough day care/early childhood services for parenting students.

RECOMMENDATION 12: Schools and social service agencies must work with community planners and private providers to ensure that adequate placements are set aside for the children of teenage mothers.

PROBLEM 13: Department of Social Services-licensed day care centers, a main source of day care for parenting teenagers, are designed for older working mothers and have built in disincentives for adolescents still attending school. Reimbursement is based on daily attendance, rather than true cost. In the "Big Five School Districts," day care providers have different beliefs about how many absences a child is allowed to remain eligible for state reimbursement. Providers are sometimes reluctant to accept children of teenagers because of the uncertainty of payment.

RECOMMENDATION 13: Day care policy and fiscal guidelines must be revised to accommodate teenage parents who are attending school. A new category of service delivery and fiscal reimbursement needs to be developed specifically for parenting students. Education and social service personnel must develop integrated service plans together for this new day care set-aside program. At a minimum, funding should be based upon reimbursement of day care "slots," rather than on daily attendance. In Massachusetts, providers are reimbursed on a cost basis for services contracted by the state department of social services. Department of Social Services regulations pertaining to day care reimbursement are being revised and hopefully they will be more advantageous to teenage parents.

PROBLEM 14: School based day care costs more than other day care because intertwined into the program are counseling and parenting education for the teenage mothers. Current reimbursement formulas do not allow for such additional services.

RECOMMENDATION 14: Resources for day care services should be combined with those which are available such as TASA, APPSP, social service and health programs.

Current programs must be expanded so that they can be coordinated into school based day care and other school programs for these young women and their children.

PROBLEM 15: Initial costs incurred for day care/early childhood services are currently paid out of instructional aid funds.

RECOMMENDATION 15: Social service law, which excludes funding start-up costs for school-based day care centers, should be changed. In addition, state reimbursement for school building aid must include facilities for day care/early childhood centers that are part of the school program.

PROBLEM 16: Often, young mothers and their babies live within two miles of school or approved day care centers and are not eligible for transportation reimbursement.

RECOMMENDATION 16: Regulations and funding reimbursement for transportation of pregnant and or parenting students and their children to and from school and day care facilities should parallel those used for special education students, waiving mileage requirements for transportation aid.

RESOLVE IMPEDIMENTS TO GRADUATION FOR PREGNANT AND PARENTING TEENAGERS

The number of pregnant and parenting teenagers is escalating at a spiraling rate. Many of these young women do not complete their education. Without at least a high school education, they and their children often face unproductive lives. By the year 2000, approximately three out of four jobs will require some form of postsecondary education; 20 percent will require a college degree.⁴¹ Therefore, it is necessary that these young women at least complete their high school education in order to ensure success for them and their children. As our younger population diminishes, it is critical to the success of our country that each young person be able to make positive contributions to society and not be a drain on limited resources. A small investment in these programs will earn large dividends for our state and our nation.

Most of the recommendations of this report will cost little if any money. Many only require a better use of current resources. This will take the cooperation of governmental and other agencies on the federal, state and local levels. Although these agencies are trying to complete their missions and address the needs of pregnant and parenting teenagers, too often these services are duplicative or impede efforts to assist in other vital aspects of the young woman's life. A holistic approach to helping these young women and their children must be implemented as provided in the recommendations in this report. Without immediate changes most of these young women and their children face a bleak future.

BIBLIOGRAPHY

1. Constancia Warren, Director, Support Center for Educational Equity for Young Mothers, Academy for Educational Development, telephone conversation, August 1990.
2. "Monthly Vital Statistics Report," final data for Vol.39 No.4 Supplement, National Center for Health Statistics (Washington: August 15, 1990), calculations based on table 4, pp. 18-19.
3. The Academy for Educational Development, A Stitch in Time: Helping Young Mothers Complete High School, (New York: Academy for Educational Development, Inc., 1989), pp. 12-13.
4. Children in Need: Investment Strategies for the Educationally Disadvantaged, Committee for Economic Development, Research and Policy Committee, (New York: 1987), p. 25.
5. "Adolescent Pregnancy-- Whose Problem Is It?" Children's Defense Fund, (Washington, D.C: Adolescent Pregnancy Prevention Clearinghouse, 1986), p. 8.
6. Ibid., p. 5.
7. Ibid., p. 8.
8. Harold Hodgekinson, Director, Center for Demographic Policy, Institute for Educational Leadership, speech before New York State Council of School Superintendents, Albany, New York, January 1990.
9. New York State Resident Live Births by Start of Prenatal Care, NYS Department of Health, Bureau of Vital Statistics, (Albany: 1988).
10. Ibid.
11. Ibid.
12. Ibid.
13. Children in Need, op. cit., p. 25.
14. Child and Adolescent Health Profile, 1987. p. 16, figure 8.

15. Alice Sterling Honig, "Developmental Effects on Children of Pregnant Adolescents," Day Care and Early Education, Fall 1984, p. 40.
16. Elizabeth A. McGee with Susan Blank, A Stitch in Time: Helping Young Mothers Complete High School, (New York: Academy for Educational Development, 1989), p. 14.
17. Children in Need, op. cit., p. 25.
18. Ibid.
19. "Key Facts About Children Living in New York State," Childrens Defense Fund, (Washington, D.C.: September 1987), p. 1.
20. Risking the Future: Adolescent Sexuality, Pregnancy, and Childbearing, Volume One, (Washington D.C.: National Academy Press, 1987), p. 139.
21. Children in Need, op. cit., p. 26.
22. Child and Adolescent Health Profile, op. cit., p. 16.
23. Risking the Future, op. cit., p. 135.
24. Ibid., p. 136.
25. Honig, op. cit., pp. 38--39.
26. Constancia Warren, Academy for Educational Development.
27. Josephine Robbins, Principal, Fulton Academic Complex, telephone conversation August 16, 1990.
28. A Stitch in Time, op. cit., p. 34.
29. New York State Assembly Task Force on Teenage Pregnancy, Public Hearing on Education for Pregnant and Parenting Students, (Albany: June 20, 1989), testimony of Maxine Giacobbe, Schenectady City School District, p. 112.
30. Ibid., pp. 108-109.

31. "Recommendations of the Chancellor's Working Group on Educational Opportunities for Pregnant and Parenting Adolescents," Board of Education of New York City, June 23, 1989, pp. 11-12.
32. "Adolescent Pregnancy: An Anatomy of a Social Problem in Search of Comprehensive Solutions," Childrens Defense Fund, (Washington, D.C: Adolescent Pregnancy Prevention Clearinghouse, January 1987), p. 5.
33. Honig, op. cit., p. 38.
34. Ibid.
35. Ibid., p. 39.
36. New York State Assembly Task Force, op. cit., p. 13.
37. "Enhancing the Outcomes of Low-Birth-Weight, Premature Infant," Journal of the American Medical Association, June 13, 1990, p. 3041.
38. Risking The Future, op. cit. p. 134.
39. "Enhancing the Outcomes," op. cit. p. 3035.
40. Honig, op. cit., p. 39.
41. Demographic Research for National Adult and Continuing Education Week, National Association for Adult and Continuing Education.

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